

Campaign Finance Tracking Form for Local Election Officials

Call OCPF with campaign finance questions at 617-979-8300

Candidate or Committee	<u>Vote Kade Carliso</u>	Year	<u>2019</u>
Report:	<input type="checkbox"/> Pre-Preliminary	<input checked="" type="checkbox"/> Pre-Election	<input type="checkbox"/> 30-Day <input type="checkbox"/> Year-End

Organization / Providing Materials / Notification *

- ☐ Organizational form provided to candidate or committee (M101, M101BQ, M101PC)
- ☐ Campaign finance report form provided to candidate or committee (M102)
- ☐ Summary of the campaign finance law provided (OCPF guide booklet)
- ☐ Filing notice (includes reporting dates, due dates and language concerning late fines)
☐ Pre-Preliminary ☐ Pre-Election ☐ 30-Day ☐ Year-end

*All forms, guides and notices can be delivered by e-mail

Inspecting Reports

The campaign finance law requires local election officials to "inspect" M102 and M102-0 campaign finance reports within 30 days of a due date.

☒
☒
☒
N/A

Correct dates for the relevant reporting period

Signatures

Positive ending balance

If the **M102-0** form is filed, the candidate does not have a committees and has not received any contributions, made any expenditures or incurred any obligations during the reporting period, and does not have a campaign fund in existence.

Contributions (Monetary receipts and in-kind contributions)

☒ **Names and Addresses** for contributions of more than \$50

☒ **Occupation and Employer** for contributions of \$200 or more

N/A No contributions from corporations, business partnerships, LLCs or LLPs

☒ No contributions from individuals for more than ~~\$1,000~~ 500 (see OCPF's limits chart for other limits)

Expenditures

☒ Vendor Names and Addresses for expenditures of more than \$50

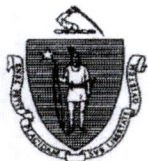
☒ Purpose information is disclosed

N/A Reimbursements form (R-1s) filed for reimbursements

Date of Inspection

11/14/2019

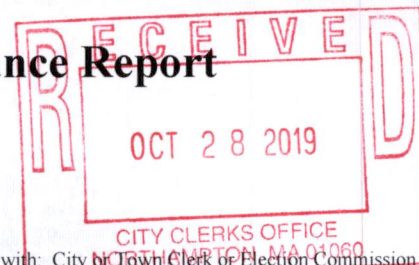
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Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance



File with: City of Northampton Clerk of Election Commission

Fill in Reporting Period dates: Beginning Date: Aug 1, 2019 Ending Date: Oct 18, 2019

Type of Report: (Check one)

☐ 8th day preceding preliminary ☒ 8th day preceding election ☐ 30 day after election ☐ year-end report ☐ dissolution

Katherine Ryan Cardoso

Candidate Full Name (if applicable)

Northampton School Committee At-Large

Office Sought and District

135 Hillcrest Dr, Florence, MA 01062

Residential Address

E-mail: Katecardoso@comcast.net

Phone # (optional): (781) 640-5916

Vote Kate Cardoso

Committee Name

Nona (Nonie) Bouthilette

Name of Committee Treasurer

135 Hillcrest Dr, Florence, MA 01062

Committee Mailing Address

E-mail: Katecardoso@comcast.net

Phone # (optional): (781) 640-5916

SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	0
Line 2: Total receipts this period (page 3, line 11)	829.29
Line 3: Subtotal (line 1 plus line 2)	829.29
Line 4: Total expenditures this period (page 5, line 14)	829.29
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (page 6)	250
Line 7: Total (all) outstanding liabilities (page 7)	0
Line 8: Name of bank(s) used:	Greenfield Savings Bank

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Nona Bouthilette (Treasurer's signature)

Date: 10.28.19

FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

Candidate with Committee

☒ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period that are not otherwise disclosed in this report.

Candidate without Committee

☐ I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this candidate in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: [Signature] (Candidate's signature)

Date: 10/28/19

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Oct 6, 2019	Sarah Barr 69 Barrett St Northampton, MA 01060	50	Administrator Amherst College
Sep 25, 2019	Patrick Boughan 9 Harold St Florence, MA 01062	25	Engineer ISO New England
Oct 13, 2019	Barry Bouthilette 3 Trinity Row Florence, MA 01062	100	Health Coach Self-employed
Aug 29, 2019	Tara Brewster 67 Chestnut St Florence, MA 01062	100	VP Business Development Greenfield Savings Bank
Oct 5, 2019	Sarah Bittenwieser 46 Franklin St Northampton, MA 01060	50	Writer Self-employed
Oct 6, 2019	Adena Calden 21 Cloverdale St Florence, MA 01062	25	Senior Lecturer II UMass Amherst
Oct 16, 2019	Kate Cardoso 135 Hillcrest Dr Florence, MA 01062 (self donation) +	154.29	Meeting Planner Self-employed
Oct 7, 2019	Jacob Ditkovski 35 Fox Farms Rd Florence, MA 01062	50	Homemaker Self-employed
Sep 9, 2019	Paul Ferreira 57 Providence Highway Norwood, MA 02062	100	Business Executive HMI, Inc.
Oct 5, 2019	Lindsay Fogg-Willits 43 Beattie Dr Florence, MA 01062	50	Owner Art Always
Aug 31, 2019	Owen Freeman-Daniels PO Box 954 Williamsburg, MA 01062	50	Broker Self-employed
Sep 18, 2019	Linda Matson 140 Hillcrest Dr Florence, MA 01062	25	Retired
Line 9: Total Receipts over \$50 (or listed above)		779.9	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		779.9	

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Oct 16, 2019	Marlene Rachelle 157 Hillcrest Dr Florence, MA 01062	50	Educator Beit Ahavah
Line 9: Total Receipts over \$50 (or listed above)		829.29	← Enter on page 1, line 2
Line 10: Total Receipts \$50 and under* (not listed above)			
Line 11: TOTAL RECEIPTS IN THE PERIOD		829.29	

* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
Oct 16, 2019	ActBlue	ActBlue Technical Services, P.O. Box 441146, Somerville, MA 02144	Contribution Processing Fees	24.72
Sep 16, 2019	CampaignsThatWin	210 Park Ave Worcester, MA 01609	Campaign Lawn Signs	685.31
Oct 4, 2019	Collective Copies	93 Main St #1 Florence, MA 01062	Campaign Flyers	51.53
Oct 4, 2019	OntheButton	59 Nonotuck St. First Floor Florence, MA 01062-1905	Campaign Buttons	67.73
Line 12: Total Expenditures over \$50 (or listed above)				829.29
Line 13: Total Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				829.29

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE B: EXPENDITURES (continued)[illegible]

* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Aug 23, 2019	Paul Walsh	309 Union St Ashland, MA 01721	Logo Design	250
		Line 15: In-Kind Contributions over \$50 (or listed above)		250
		Line 16: In-Kind Contributions \$50 & under (not listed above)		
Enter on page 1, line 6 →		Line 17: TOTAL IN-KIND CONTRIBUTIONS		250

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)				